

# Surgeon General: 'No Policy Change for Children'

"You can be assured of my personal advocacy and the moral suasion of my office for children and the institutions that care for them," Dr. C. Everett Koop, Surgeon General of the United States told NACHRI members at the Mid-Year Meeting.

Koop, formerly medical director of Children's Hospital of Philadelphia, declared that he brings, in his advocacy, "a point of view not often expressed in government" and that he is carrying out a "constant educational program with my colleagues."

In reviewing "The Administration's Policy on Child Health," Koop declared that fundamental health policies haven't been changed and that "this administration is as committed as any previous to enhancing the well-being of all the nation's children; the difference is in how we carry it out and fund it."

The administration, he said, is taking a hard look at which programs are better carried out by the state and which by the federal government. In 1980, there were 69 health programs which cost \$8 million divided among more than 500 categorical programs; in 1981, the health programs had been combined into four blocks — prevention; alcohol, drug abuse and mental health; primary care, including community health services; and maternal and child health.

"We don't want the traditional maternal and child health programs compromised," Koop said, noting that 48 states have already adopted this block and predicting that the other two will adopt it shortly.

He said he "feels more comfortable talking about a constellation of policies that rank collectively as Number 1 than trying to say that any particular policy has top priority," although Health and Human Services Secretary Richard H. Schweiker has "promised to put prevention at the top of the federal medical agenda." Administration policies generally follow the "road map" of the Surgeon General's report, "Healthy People," which



**C. Everett Koop, M.D.**

spells out 15 health areas needing particular attention.

Koop cited immunization programs, where President Reagan has proposed "a modest increase," as examples of the administration's

attitude toward health. Most children have already received basic immunizations, he declared, stating that "we have reason to believe indigenous measles will be conquered by this fall." Yet he could find no cause for complacency — "the remaining 3 million are the most difficult to reach, and we don't know how much the cost of vaccines will go up in the next year."

Secretary Schweiker "has promised to ask for more money" if the amount for the immunization program is insufficient.

Koop saw the administration's commitment to immunization as "typical" of its commitment in other areas. For example:

- A national campaign to bring infant mortality and morbidity down. The "Healthy Mothers, Healthy Babies" educational campaign has brought together 40 voluntary agencies working with the U.S. Public Health Service; "we're delighted to have them working together."

Purposes of this campaign — "easy to state, difficult to achieve" — are to provide information that promotes healthy behavior in pregnant women and women planning pregnancy; to increase understanding among them of certain health risks and the importance of their taking responsibility for their health of their babies; and to motivate them to take actions to protect their own health, to get regular pre-natal care, and to seek other kinds of help when they need it.

"We hope this all-out educational campaign will help cut infant mortality and morbidity," Koop declared. "The relationship isn't always precise; between 1970 and 1981, infant mortality dropped from 20 per 1,000 live births to 11.8 per 1,000, and there was a reduction in cerebral palsy. There was a similar experience with Down's Syndrome — but fewer women over 35 are having children."

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# Koop Promises Support

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- Birth defects. The Center for Disease Control, as part of an 11-year program, has been collecting information on 150 birth defects and in the process "learning things" important to policy development — such as that these defects have a low and fairly stable rate of incidence, and that their occurrence doesn't seem to be influenced by obstetrical practice, perinatal care, nutrition, diet, or environmental function.

"We need a flexible strategy of research, prevention, and detection to make headway in reducing birth defects. The administration has faced this idea and is asking for budget increases for research and prevention — and for a proposed partnership with the states to improve detection."

- Respirator-dependent infants and children. "I feel a personal responsibility here that I haven't forgotten," Koop said. Feelers have been put out to the private sector for financial support for home programs for such children, and USPHS is trying to mount suitable demonstrations for maintaining these children at substantially reduced costs. "The cooperation of NACHRI members and others makes it possible to hope that all this can come about."

"We in the administration have a strong desire to meet these issues head-on and solve them for the good of the nation and its children," he concluded. "All of us, in and out of government, are committed to strengthening child health as a fundamental tenet of our health policy."